

LAST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH		5/3
O.I.P.E. CLASSIFIER	fa	720 47	5/22/01
FORMALITY REVIEW			06-22-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date		
Final	9	4	11 14
Original	01	02	03 04
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18			
19			
20			
21			
22		✓	✓
23		1	1
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29			
30			
31			
32			
33		✓	✓
34		0	0
35		0	0
36		0	0
37		✓	✓
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43			
44			
45			
46			
47			
48			
49		✓	✓
50		0	0

Claim	Date		
Final	11	7	4
Original	02	03	04
51	0	0	0
52	0	0	0
53	✓	✓	
54			
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Claim	Date		
Final	7	4	
Original	03	04	
101	✓		
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If more than 150 claims or 10 actions  
staple additional sheet here